

## Certification of Death

|  |  |   |                                       |
|--|--|---|---------------------------------------|
| Disposition Permit Number: E528079   |  | State File Number: 386214-2022  |                                       |
| Decedent's Legal Name:<br><b>Catherine V. Brennan</b>  |  | Date of Death:<br><b>July 29, 2022</b>  |                                       |
| Alias:   |  | Social Security Number:<br><b>169-52-3559</b>   |                                       |
| Age:<br><b>63 Years</b>  | Date of Birth:<br><b>November 26, 1958</b> | Birthplace:<br><b>Philadelphia, Pennsylvania</b>  | Ever in US Armed Forces:<br><b>No</b> |
| Residence Address: <b>300 Woodbine Avenue Lower Southampton Township, Pennsylvania 19053</b>                                     |  | Marital Status at Time of Death:<br><b>Married</b>  |                                       |
| Residence County: <b>Bucks</b>   |  | Surviving Spouse's Name:<br><b>Kevin Brennan</b>  |                                       |
| Father / Parent's Name:<br><b>Arthur Brookes</b>   |  | Mother / Parent's Name:<br><b>Alberta Erwin</b>   |                                       |
| Informant's Name:<br><b>Kevin Brennan</b>  |  | Informant's Relationship to Decedent:<br><b>Spouse</b>                                      |                                       |
| Place of Death:<br><b>Decedent's Residence</b>   |  | City or Town, State, and Zip Code:<br><b>Lower Southampton Township, Pennsylvania 19053</b> |                                       |
| Place of Death Address: <b>300 Woodbine Avenue</b>   |  | County of Death: <b>Bucks</b>   |                                       |
| Method of Disposition:<br><b>Cremation</b>   |  | Place of Disposition:<br><b>L.C. Crematories Inc.</b>                                       |                                       |
| Location of Disposition:<br><b>Levittown, Pennsylvania</b>   |  | Date of Disposition:<br><b>August 02, 2022</b>  | Time of Death:<br><b>12:57</b>        |
| Name and Address of Funeral Facility: <b>John F Givnish Funeral Home Inc 10975 Academy Road Philadelphia, Pennsylvania 19154</b> |  | Funeral Director:<br><b>Theodore J Geitner Jr (Electronically Signed)</b>                   |                                       |
| PART I. Cause of Death:  |  |   |                                       |
| Immediate Cause<br>→ a. <b>Small Cell Lung Cancer</b>  |  | Approximate Interval:<br>Onset to Death<br><b>4 Mths</b>                                    |                                       |
| b. <<<<>>  |  | <<<<>>  |                                       |
| c. <<<<>>  |  | <<<<>>  |                                       |
| d. <<<<>>  |  | <<<<>>  |                                       |
| PART II. Other Significant Conditions Contributing to Death:   |  |   |                                       |
| <<<<>>   |  | Was an Autopsy Performed? <b>No</b>   |                                       |
| Date of Injury:  |  | Time of Injury:   |                                       |
| Place of Injury:   |  | Were Autopsy Findings Available to Complete Cause of Death? <b>Unrecorded</b>               |                                       |
| Location of Injury:  |  | Injury at Work:   |                                       |
| Describe How Injury Occurred:  |  |   |                                       |
| If Transportation Injury, Specify:   |  |   |                                       |
| Did Tobacco Use Contribute to Death?<br><b>Yes</b>   |  | Pregnant at Time of Death:<br><b>Unrecorded</b>   |                                       |
| Hispanic Origin:<br><b>Not Spanish/Hispanic/Latino</b>   |  | Manner of Death:<br><b>Natural</b>  |                                       |
| Education:<br><b>High School graduate or GED completed</b>   |  | Decedent's Race:<br><b>White</b>  |                                       |
| Usual Occupation: <b>School Librarian</b>  |  | Kind of Business/Industry: <b>Education Industry</b>  |                                       |
| Certifier's Name & Title: <b>MOSSELM BORGHAEI DO (Signature on File)</b>   |  | Address: <b>333 Cottman Avenue Philadelphia, Pennsylvania 19111</b>                         |                                       |
| Date Certified: <b>August 02, 2022</b>   |  | Registrar's Name/District Number: <b>Elizabeth A Wurster (Signature on File)</b>            |                                       |
| Date Filed: <b>August 03, 2022</b>   |  | 46-427  |                                       |

This is to certify that this is a true copy of the record which is on file in the Pennsylvania Department of Health, in accordance with the Vital Statistics Law of 1953, as amended.

*Elizabeth Wurster* **AUG - 8 2022**  
Local Registrar Date Issued

*Lisa A. Hasselbrook*  
Lisa A. Hasselbrook  
State Registrar



H105.805.1 REV (8/20)

WARNING: THIS DOCUMENT IS PRINTED ON SECURITY WATERMARKED PAPER  
DO NOT ACCEPT WITHOUT VERIFYING THE PRESENCE OF THE WATERMARK.

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Exhibit "A"